PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

4114-1

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS	3	(Column 1)		(Coldinii 2)) ·			OR 7		,	
			1 /					RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20= '		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =					X43=		OR	X86=		
MU	JLTIPLE DEPE	NDENT CLAIM P	RESENT		<u>_</u> _			+145=		OR			
* If the difference in column 1 is less than zero, enter "0" in						column 2		TOTAL		OR	TOTAL	720	
	C				J	OTHER	THAN						
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	:	
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
+145= TOTAL											TOTAL		
		A	DDIT. FEE		OR	ADDIT. FEE							
		(Column 1)	1	(Colum		(Column 3)	_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE ⁻		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		= .	▎ऻ	X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT (CLAIM		l 			OH			
							L	+145=		OR	+290=	•	
							Al	TOTAL ODIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n:2)	(Column 3)					, •		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=		X43=			X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/40-		OR			
* If the entry in column 1 is less than the intry in column 2 write "0" in column 2										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
7	he "Highest Num	mber Pr. Viously Paid ber Previously Paid	I For" (Total or	Independen	iess than t) is the l	is, enter "3." highest number	•		opriat box				